Effective January 1, 2003 (6663 78)												5		
		CLAIMS AS	(Column		(Column 2)			SMALL ENTITY			OTHER THAN			
TOTAL CLAIMS			5					RATE	F	Ε		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	E 375	5.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS					• 4			X\$ 9=			OR	X\$18=	0	
INDEPENDENT CLAIMS			3 minus 3 =		· 0			X42=	1		OR	X84=	0	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=	1		OR	+280=	0	
* H	the difference	in column 1 is	less than zero, enter "0" in			olumn 2	_	TOTAL				TOTAL	HIV	
	1. / CI	LAIMS AS A	MENDED	, , , ,	` -		•••	•	THAN					
	3116106	(Column 1)	·	(Colu		(Column 3)	_	SMAL	L ENTI	TY	OR	SMALL	NTITY	
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ОП	DI- NAL EE	/	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	.5	Minus	**	0	-0		X\$ 9=			OR	X\$18=		
ME	Independent -3		Minus •••		3	-0		X42=	1		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR	+280=		
1	AMOT							YOY.			OR	TOYAL ABDIT, FEE	/	
1	2-05-06	(Column 1)		(Colu	<u>mn 2)</u>	(Column 3	ኒ	ADDIT. FE	:			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ADDI- TIONAL FEE ADDI- TIONAL FEE ADDI- TIONAL FEE ADDI- TIONAL FEE ADDI- TIONAL FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	TIO	DI- NAL EE		RATE	TIONAL	
AMENDMENT	Total	. 5	Minus	•6	30			X\$ 9=			OR	X\$18=		
AME	Independent	• 3	Minus	***	3		4	X42=			OR	X84=		
_	FIRST PRESE	NIATION OF M	OCTIPLE DEP	ENDEN	DENT CLAIM									
			_					TOT.			OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	mn 2).	(Column 3	n		7				V	
		CLAIMS		HIG	HEST	T	1		A	PDI-	1	-	ADDI-	
N		REMAINING AFTER AMENDMENT		PREV	ABER LOUSLY FOR	PRESENT	ı	RATE	TIO	NAL EE		RATE	TIONAL	
AMENDMENT C	Total	•	Minus	44	· · · · · · · · · · · · · · · · · · ·	2	7	X\$ 9=	$\neg r -$		OR	X\$18=		
NE SE	Independent	•	Minus	4:54		8	1	X42=				Year	1	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				TCLAIM]				OR			
	Michigan to a state of the stat	d la laca Mara	the estimate and			nhama 9		+140:			OR			
•	If the "Highest Nu	mn 1 is less than imber Previously f	aid For IN TH	IS SPACE	is less the	an 20, enter "2	0.*	ADDIT. F			OR	ADDIT, FEE	<u> </u>	
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

Application or Docket Number